

## CLAIMS ONLY

Application Number  
10632905

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend			
1	/						51		
2		/					52		
3		/					53		
4	/						54		
5		/					55		
6		/					56		
7							57		
8		/					58		
9		/					59		
10		/					60		
11		/					61		
12		/					62		
13							63		
14							64		
15							65		
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39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
Total Indep	2						Total Indep		
Total Depend	10						Total Depend		
Total Claims	12						Total Claims		